									- 1 '	- Proceso		,											
		PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003							106-8/4/8														
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SM		**************************************	OR		R THAN ENTITY										
	TOTAL CLAIMS			3/		<u> </u>		 [WE	FEE]	RATE	FEE										
	FOR			MUMBER FALED		NUMBER EXTRA		84	SIC FE	385.00	OR	DASIC FEE	770.00										
	π	OTAL CHARGE	VBLE CLAIMS	3 / minus 20=		• 11		[,	C\$ 9=	99	OR	X\$18=											
	INDEPENDENT CLAMS			minus 3 - °			2		K43=	1''	OR	X86=											
	M	LTIPLE DEPEN	IDENT CLÁIM P	RESENT				145=	1	OR													
	* If the difference in column 1 is less than zero, enter "0" in column 2							Ľ	OTAL	484	OR												
Ł.		CLAIMS AS AMENDED - PART II								4-4-1	J	OTHER	THAN										
7	7		nn 2)	(Column 3)	Si	MALL	ENTITY	OR	SMALL														
3	ARENDMENT A	·	CLAMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO NAID I	BER KUSLY	PRESENT EXTRA	R	ATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
Ŋ	ğ	Total	.46	Minus	- 3	5/	- 15	×	\$ 9=	135	OR	X\$18=											
9		Independent	· 2	Minus		3	1	[×	43+		OR	X86=											
4	PARST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								145-	145	OR	+290=											
ı	gees of -overfa 67.00.							<u></u>	TOTAL			TOTAL ADDIT, FEE											
I							(Column 3)		• i. reb	<u>گئاشان</u> گ		rasuri. FEE:											
	ENT 8		CLAMS REMAINING AFTER AMENOMENT		HIGHE NUMB PREVIO PAID F	NER HUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		AATE	ADDI- TIONAL FEE										
	2	Total	.29	Minus	sefe	12	-/	X	\$ 9=·		OR	X\$18=											
j	AME	Independent	• (1)	Minus	 /	7 .	1	×	43-		OR	X86=											
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								45-		OR	+290=											
	^	7/2		T. FEE		OR ,	ADDIT, FEE																
Į,	4	1/24/06				, -																	
	EMT C	•	CLAIMS REMAINING AFTER AMENDMENT	÷	HIGHE NUMB PREVIOU PAID F	ER UGLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
		Total	• 38	Minus	- (6		ж	9=		OR	X\$18=											
	1	independent	7	Minus	AM CANDER	2	• -	×	13-		OR.	X86=											
ľ		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						.,,	45-		OR	+290=											
	* If the entry in column 1 is test than the entry in column 2, write "0" in column 3. " If the "Highest Number Prestously Paid For" (N THIS SPACE is less than 20, enter "20,"										OR .	TOTAL											
ı	-	f the "Highest Hus	nbar Proviously Pai nbar Proviously Paic per Proviously Paic	M For IN THE	S SPACE IN	lace ther	"Z" voltor "Z."		C FEE			NDOIT. FEET NOON 1.											
L										<u> </u>		٠.											
A	200	PTD-(73 Plan 10	10					Palett St	t Territor	with Office, U.	S. DEF	FORM PTD-475 (Res. 1080) Palent and Tenderally Office, U.S. DEPARTMENT OF COMMER											

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